p/698323

2								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EI	VTITY	OR	OTHER SMALL	
TOTAL CLAIMS			34				-	RATE	Ξ	FEE	ľ	RATE	FEE .
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		· 14			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		• \$			X43=		•	OR	X86=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=			OR	+290=	
* If the difference in column 1 is less than zero, enter *(olumn 2		TOTA	L		OR	TOTAL	
12	Column 1) (Column 2) (Column 3)							SMAL	L E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 34	Minus	** 3	4	=		X\$ 9=	-		OR	X\$18=	
	Independent	. 3	Minus	***	ろ	4		. X43=			OR	X86=	
٢	FIRST PRESENTATION OF MULTIPLE DEP				NDENT CLAIM			+145=	1			+290=	
									AL		OR OR	TOTAL	
	(Column 1) (Column 2) (Column 3)								EEL		JOA ,	ADDIT. FEE	
		CLAIMS		HIGH	EST		1 r		٦	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =	11	X43=			OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=			OR	+290=	
TOTAL ADDIT. FEE											OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NO	Total	•	Minus	**		<u>:</u>		X\$ 9=	I	•	OR	X\$18=	
ME	Independent	*	Minus	*** .		=		X43=	†		OR	X86=	
L	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		!		\dagger				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											OR ,	ADDIT. FEE	
		ber Previously Paid					er tou	nd in the	appi	ropriate box	in col	umn 1. ·	